

DIABETES PARTNERS IN ACTION COALITION ANNUAL REPORT FY08

October 1, 2007 – September 30, 2008

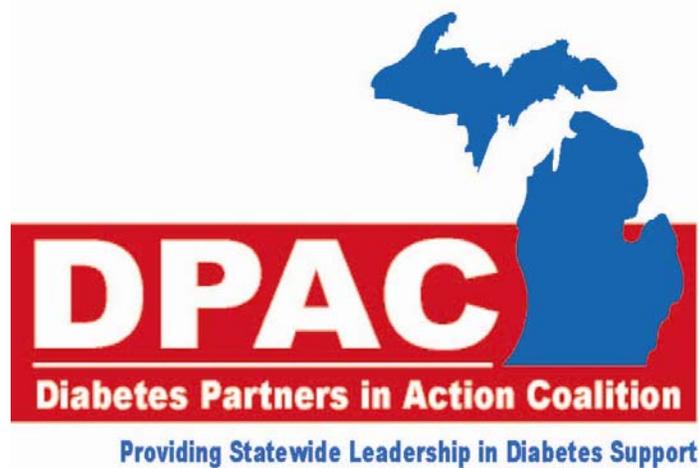


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MEMBERSHIP

At the end of FY08, DPAC was comprised of 110 members including consumers, health care professionals, business/industry leaders, and many other sectors of our community. Thank you to all of the individuals and organizations who are members of DPAC for the time and resources that have been contributed to this volunteer-driven coalition.

Member organizations include:

Advantage Health Centers	Oak Park YMCA
American Association of Diabetes Educators	Otsego Memorial Hospital
American Diabetes Association	Pfizer Inc.
American Dietetics Association	Priority Health
Amylin Pharmaceuticals	REACH Detroit Partnership/CHASS
Blue Cross Blue Shield of Michigan	Region 2 Area Agency on Aging
Botsford Hospital	Sanofi Aventis
Detroit Dept Of Health & Wellness Promotion	St. Joseph Mercy Oakland Hospital
Eli Lilly and Company	St. Mary's Health Link
Garden City Hospital	Takeda Pharmaceuticals
Glaxo-Smith Kline	Oak Park YMCA
Great Lakes Medical Supply	Otsego Memorial Hospital
Greater Detroit Area Health Council	Pfizer Inc.
Hurley Medical Center	Priority Health
INNOVEX	REACH Detroit Partnership/CHASS
Johnson & Johnson Co.	Region 2 Area Agency on Aging
Juvenile Diabetes Research Foundation	Sanofi Aventis
Kent County Health Department	St. Joseph Mercy Oakland Hospital
MDCH Bureau of Epidemiology	St. Mary's Health Link
MDCH Cardiovascular Health Section	Takeda Pharmaceuticals
MDCH Diabetes & Other Chronic Diseases Section	University of Detroit Mercy, School of Dentistry
MDCH Genomics and Birth Defects	University of Michigan
MDCH Oral Health Program	Up Hill Solutions
MDCH Tobacco Section	Wayne State University
MESSA	Western Michigan University
Mary Free Bed Rehabilitation Hospital	Without a Vision the People will Perish
McLaren Regional Medical Center	
Med Net One	
Michigan Diabetes Outreach Network	
Michigan Diabetes Research & Translation Center	
Michigan Organization of Diabetes Educators	
Mercy General Health Partners	
MI Association of Health Plans Foundation	
Michigan Association for School Nurses	
Michigan Dietetic Association	
Michigan Optometric Association	
Michigan Pharmacists Association	
Michigan Primary Care Association	
MSUE Family and Consumer Sciences	
National Kidney Foundation of Michigan	
Novo Nordisk	

EXECUTIVE SUMMARY

This report provides an update on the many objectives that DPAC and its members undertook during the past year, October 1, 2007 and September 30, 2008. Progress was reported for the objectives established by workgroups to implement the strategic plan recommendations as well as the key priorities established by the Board.

Beginning in the Fall 2007, the DPAC Board completed an analysis of the Strengths, Weaknesses, Opportunities and Threats for DPAC (SWOT analysis). At the January Board meeting, three themes were identified as top priorities for DPAC: Impact, Increased Awareness, and Membership. Throughout the year, the Board and the DPAC workgroups/committees have endeavored to develop responses to these themes and tracked progress toward implementation of the recommended responses. With this strategic approach to addressing the top priorities facing DPAC we achieved a great deal during the past year and we are well positioned to further develop the coalition.

In FY08, the DPAC board and membership committee implemented a targeted recruitment effort to identify underrepresented organization sectors and enhance levels of engagement among current members. DPAC added 32 new members and expanded total membership by 17%. And, based on a membership survey conducted in October 2008, 78% of members participating in the survey reported high or very high levels of engagement. Attendance at meetings has been rising steadily with attendance at the October meeting reaching 25% higher than the May meeting. See *page 6* for further information from the DPAC member survey.

The Communications Workgroup developed a new tagline to clarify DPAC's purpose and revised the logo to increase the focus on the full name of the coalition and to include the tagline as part of the logo. A DPAC brochure was created to increase awareness of DPAC and its mission and to serve as a recruitment tool. Display panels were designed and printed to be part of a DPAC display that includes NDEP materials as well as other educational materials for consumers and professionals that promote diabetes education and support programs. The workgroup identified education conferences and professional training opportunities that provided opportunities to exhibit the DPAC display to potential DPAC members. DPAC brochures were distributed to all members along with brochure stands labeled "DPAC Proud Member" so that we can extend our reach by having DPAC members add the brochures to their own exhibit stands in addition to the five exhibits of the full DPAC display completed this past year.

The Advocacy Workgroup developed a Diabetes Care Management Report highlighting aspects of care management that should be included as part of quality diabetes care and created an overarching Michigan Diabetes and Kidney Disease Advocacy Plan to guide advocacy and public policy efforts for 2009 – 2014. The Advocacy Workgroup provided a webinar on advocacy for more than 50 participants in advance of Diabetes and Kidney Disease Advocacy Day. 100% of webinar participants responding reported increased understanding of advocacy and the issues to be address on Diabetes and Kidney Disease Advocacy Day and all participants also reported increased confidence in their ability to talk with legislators and an understanding of the importance of sharing stories. Funding was restored to the Healthy Michigan Fund and full funding was restored to the Diabetes Prevention and Control Programs line due to the efforts of advocates for diabetes and kidney disease programs. Advocacy updates from partner

organizations have been added to the full membership meeting agendas; this year, ADA provided an update on the Safety in Schools legislation (HB6555) and informed members of their support of the Stem Cell Ballot Proposal.

Other DPAC workgroups focused this year's activities on implementation of Recommendation 6 of the Michigan Diabetes Strategic Plan and completion of activities initiated in FY07. Through active collaboration, DPAC has been able to mobilize resources to improve access to diabetes self-management training, supplies, and health care. The Prevention workgroup distributed the treatment plan and consumer brochure to partner organizations. The consumer brochure was also translated and printed in Spanish. The Training and Education Programs workgroup created a "Diabetes Community Health Workers" presentation packet to help community health centers understand the role of diabetes community health workers in diabetes care. The Data, Research and Evaluation Workgroup develop a fact sheet on Diabetes and the Uninsured and provided updates on the latest research and surveillance data to the DPAC membership.

Throughout the year, the DPAC Board and workgroups have reviewed the recommendations included in the 2003 Michigan Diabetes Strategic Plan and contributed to the development of a two-year Michigan Diabetes Action Plan for 2009-2011 to focus activities for DPAC and our partner organizations. In FY09, DPAC will begin implementation of measurable objectives laid out in the Michigan Diabetes Action Plan.

ABOUT DPAC

Mission

To provide statewide leadership to prevent and control diabetes and reduce its impact in Michigan.

Vision

Through active collaboration, DPAC has mobilized resources to ensure a unified course toward the reduction of diabetes and its complications in Michigan.

Coalition Structure

DPAC has a board of directors that meets quarterly to address overarching issues and to facilitate communication between workgroups. There are five workgroups that meet approximately once a month, usually via conference call: Advocacy and Policy; Communication and Public Awareness; Data, Evaluation and Research (DaRE); Prevention; and Training and Education Programs. And, we also have a standing Membership committee. Governance issues are addressed by the leadership team and the Board.

Strategic Plan

The *Michigan Diabetes Strategic Plan* outlines the need to focus on: (1) increased diabetes prevention and public awareness efforts, (2) statewide advocacy and policy initiatives that reduce barriers to care, (3) effective use of diabetes data and research in clinical settings and (4) targeted diabetes training and program opportunities for people with diabetes and pre-diabetes and their service providers. DPAC uses the Strategic Plan to guide its activities and has established workgroups to address the focus areas listed above.

FY08 Strategic Plan Priority

DPAC continued to focus this year's activities on implementation of Strategic Plan Recommendation # 6, to improve access to diabetes self-management training, supplies, and health care.

Michigan Diabetes Action Plan

This year each workgroup contributed to the development of goals, objectives and activities for the Michigan Diabetes Action Plan. This involved reviewing the 2003 Michigan Diabetes Strategic Plan's fourteen recommendations, modifying them to reflect current needs, and prioritization of goals for the next two years. The action plan will guide DPAC's work for the next two years, 2009 – 2011. While not all of the activities in the Action Plan will be lead or completed by DPAC workgroups and its members, DPAC provides oversight of implementation of the plan. During this time, DPAC will also work to develop a new strategic plan that will include input from consumers, health care professionals, DPAC members and other partner organizations and the public.

In addition to contributing to the development of a statewide Action Plan, workgroups have developed their own annual work plans in conjunction with the goals, objectives and activities laid out in the Action Plan. These work plans define DPAC targets, identify person(s) responsible for completion of each activity, and set timelines for completion. The work plans will be reviewed at each meeting to focus activity and monitor progress.

SELECTED ACCOMPLISHMENTS FOR FY08

Working together to further the Michigan Diabetes Strategic Plan, DPAC and its member organizations have made significant progress toward achieving our goals.

Governance

- Tracked progress on established objectives for workgroups and key priorities from the Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis.
- Provided input into the development of the Michigan Diabetes Action Plan including approval of Action Plan goals, structure of the Background section, and development of a review panel.
- Addressed volunteer management and member engagement.
- Provided input to MQIC on guidelines for Management of Diabetes Mellitus and distributed revised MQIC guidelines on diabetes and adult prevention.
- Adopted the “Smoke-free Meetings Resolution” and promoted this resolution to the DPAC members.

Membership

In FY08, the DPAC board and membership committee implemented a targeted recruitment effort to identify underrepresented organization sectors and enhance levels of engagement among current members.

- Increased membership by 17%, including 32 new members, for a total of 110 active DPAC members.
- Designated an organizational sector for each member, based on CDC recommendations, and tallied representatives from each sector to determine where gaps exist.
- Developed and began implementation of recruitment plan:
 - Membership committee members have approached potential members from key organizations, targeting sectors approved by board: managed care organizations; business and industry; consumers; labor organizations/unions; faith institutions; and social service organizations.
 - Encouraged DPAC workgroups to promote DPAC membership from within their workgroups.
 - Updated registration form and developed form for DPAC member nominations, both listing sectors recommended by CDC for advisory groups.
- Reinstated orientation session for new members at general membership meetings: approximately 30 members attended orientation sessions during 2008.
- Instituted follow up calls to new members after general membership meetings to assist them to feel more engaged with both their workgroup and DPAC in general.
- Increased attendance at the full membership meetings by 25% in October meeting over the May meeting.
- Based on a membership survey conducted in October 2008, 78% of members participating in the survey reported high or very high levels of engagement.

Advocacy

- Provided a webinar on advocacy for more than 50 participants in advance of Diabetes and Kidney Disease Advocacy Day. 100% of webinar participants responding reported increased understanding of advocacy and the issues to be address on Diabetes and Kidney Disease Advocacy Day and all participants also reported increased confidence in their ability to talk with legislators and an understanding of the importance of sharing stories.
- Promoted and participated in Diabetes and Kidney Disease Advocacy Day (in Lansing); Of 105 total participants, 12 participants were DPAC members and 48 were consumers, many of whom learned about Advocacy Day through DPAC partners.
- Developed a Diabetes Care Management Report highlighting aspects of care management that should be included as part of quality diabetes care and created an overarching Michigan Diabetes and Kidney Disease Advocacy Plan to guide advocacy and public policy efforts for 2009 – 2014.
- Promoted advocacy efforts among DPAC members and registered all members to receive National Kidney Foundation of Michigan advocacy alerts.

Communication and Public Awareness

- Worked with DPAC Board to develop a tagline for DPAC and updated the logo to integrate the tagline.
- Identified and participated in five professional events with the DPAC display (JDRF, NKFM, MALPH, ADA Expo, DSME).
- Designed and produced a three-panel DPAC display and identified materials to be part of the display table.
- Produced a brochure for member recruitment and to increase awareness of DPAC's goals. These were distributed to members along with a brochure stand for members to display at their offices or along with their displays at meetings or events.
- Contributed to the ongoing development of the DPAC website.
- Produced quarterly DPAC newsletter with feature articles on DPAC organizations, workgroup updates and resources.

Data, Research and Evaluation (DaRE)

- Summarized current coverage for Medicare.
- Translation brief – “Diabetes & CVD: Clinical Practice Implications of ADVANCE, ACCORD & VA Trials”
- Translation brief – “Millions of U.S. Residents With Chronic Diseases Do Not Receive Adequate Treatment Because They are Uninsured, Study Finds”
- Diabetes in the Uninsured: Michigan Fact Sheet
- Provided input for design of the DPAC Full Membership Survey

Prevention

- Revised and reprinted the Prediabetes—Are You at Risk consumer brochure and Pre-Diabetes/Diabetes Treatment Plan. Placed the brochure and treatment plan on the DON and DPAC website.
- Translated and printed the Pre-diabetes—Are You at Risk consumer brochure into Spanish.
- Drafted a survey to assess pre-diabetes activities and services provided in the community by various organizations.
- Completed draft of Goal A for Michigan Diabetes Action Plan, including objectives and activities (Prevent and delay the onset of diabetes by promoting diabetes and pre-diabetes screening, weight loss, improved nutrition and increased physical activity among Michigan residents).

Training and Education Programs

- Completed power point presentation on Diabetes Community Health Workers and shared with DPAC membership.
- Wrote script and talking points to be used with the DCHW presentation.
- Determined CHW curriculums available elsewhere and will not be developed within group. Resources cited in DCHW presentation.
- Monitored organizations involved and discussions related to certification. DCHW certification is an on-going national issue.
- Recruited and added several new workgroup members.

"We have come a long way, but not as half as far as we will go."

Unknown

Member Survey Results

A survey was distributed to all DPAC members in October 2008 to collect information from our membership on their engagement in the coalition, topics of interest for presentations and translation briefs, and to determine the extent to which members are further distributing materials developed and disseminated to members. The survey was developed and analyzed by the Data, Research and Evaluation (DaRE) workgroup using Survey Monkey.

We received 65 responses to the survey. Those completing the survey were most likely to be new members (56.9% had been members for less than two years) or long-term members (23.1% had been members for five or more years). More than 70% responded that they are clear on their role as a member of DPAC. And, 68% rated their level of engagement as engaged/very engaged. These results indicate that we have been successful in addressing our goal of increasing levels of member engagement as well as adding new, active members to DPAC.

One of the benefits of membership in DPAC is the opportunity to learn about programs and resources. And, further distribution of products developed or distributed through DPAC is a key part of the health communication plan for the Michigan Diabetes Prevention and Control Program. We asked members to tell us to what degree they further disseminated DPAC resources within their organization or community and learned that only 43% are currently doing this on a regular basis. An additional 38% further disseminate information some of the time which provides us with an opportunity to increase our distribution of materials among this group of members as well as those who are not currently sharing resources within their communities.

DPAC developed or distributed several fact sheets, presentation packets, brochures and other products during the past year. The rate of further distribution by DPAC members to colleagues to consumers is as follows:

Products developed or distributed through DPAC	%	Count
Translation brief - "Millions of U.S. Residents With Chronic Diseases Do Not Receive Adequate Treatment Because They are Uninsured, Study Finds"	11.7	7
Translation brief - "Diabetes & CVD: Clinical Practice Implications of ADVANCE, ACCORD & VA Trials"	16.7	10
Michigan BRFSS Surveillance Brief newsletter	35.0	21
Diabetes in the Uninsured: Michigan fact sheet	45.0	27
"Diabetes: The Numbers (Michigan Data)" presentation packet	46.7	28
"Diabetes Community Health Worker" presentation packet	31.7	19
DPAC newsletter - sent electronically once each quarter	33.3	20
DPAC updates - sent electronically approximately once a month	18.3	11
DPAC FY07 Annual Report	11.7	7
2007 National Diabetes Fact Sheet (CDC)	61.7	37
Michigan Diabetes Fact Sheet	75.0	45
Michigan Pre-diabetes Fact Sheet	31.7	19
Pre-diabetes consumer brochure	31.7	19
Pre-diabetes and Diabetes treatment plan	21.7	13
"Diabetes, Smoking and Your Health" flyer	20.0	12
Quitline flyer	18.3	11
Materials provided by exhibitors at DPAC full membership meetings	26.7	16
Smoke-free Meeting Resolution	10.0	6

To prioritize topics for further presentations, translation briefs, and fact sheets we asked members to provide information on the topics for which they would be interested in additional information. Based on the frequency of response, the following topics and themes were identified as priorities for the coming year:

- Prevention and Pre-diabetes
- Access
- Surveillance
- Evaluation/Evidence-Based Program Development
- Tobacco
- Children with Diabetes and/or Obesity
- Health Disparities
- Community Resources
- Costs

All of the data collected through this survey will be used to establish priorities for Board and workgroup activity in FY09. We will endeavor to focus full membership meetings on the topics of interest and will generate information and resources to fulfill this need. We work with members to increase the distribution of information and resources to their colleagues and to consumers and we will use the information on type of materials that were distributed to inform decisions on the format materials should take to encourage further dissemination.

To improve the experience of members in DPAC, we will continue to work with individuals to determine what their interests are and to work with them to find the best opportunities for them to engage in DPAC activities. One member commented that “We need to find wins to keep members engaged with a sense of accomplishment.” We will work to improve our efforts to communicate the accomplishments of DPAC and its workgroups to share our progress toward completing our objectives and achieving our goals.

DPAC PRIORITIES FY09

Working together to provide statewide leadership to prevent and control diabetes and reduce its impact in Michigan and to further the Michigan Diabetes State Plan, DPAC and its member organizations will:

Membership

- Implement current recruitment plan both with efforts from membership committee and DPAC membership at large to recruit members from targeted sectors: managed care organizations; business and industry (especially non health care related); consumers; labor organizations/unions; faith institutions; and social service organizations.
- Connect with organizations in outlying areas of the state to attempt to recruit more members from those under-represented areas.
- Focus on attracting organizations or members that may help to increase diversity in DPAC membership based on analysis of current membership list.

Advocacy

- Engage identified partners in DPAC advocacy efforts by meeting with representatives from these organizations to discuss their advocacy platforms, current policy activities, and opportunities to collaborate.
- Promote and participate in Diabetes and Kidney Disease Advocacy Day (Goal – 15% participation rate for DPAC members).
- Develop and disseminate common advocacy messages through legislative handouts and distribution of information on program outcomes to other audiences (ex. websites, newsletters, fact sheets).
- Share updates on pending and active legislation related to diabetes.
- Promote ongoing education of consumers and health care professionals about the need for self-management support and education.

DPAC Advocacy and Public Policy Workgroup FY09 Michigan Legislative Priorities

1. Promote appropriate, affordable, accessible healthcare coverage for the prevention and care of diabetes and kidney disease including pharmaceutical expenses, equipment and supplies.
2. Promote diabetes self-management education and diabetes self-management support resources and reimbursement for these programs.
3. Promote the business case for diabetes and kidney disease prevention and control.
4. Disseminate DPAC report on key components of success that should be addressed in diabetes care models (based on Chronic Care Model and emerging diabetes care management approaches).
5. Track and take action as necessary on issues related to diabetes and kidney disease.

Communication and Public Awareness

- Assist other workgroups with their communication needs, such as distribution of materials and postings on the website.
- Produce four quarterly newsletters for DPAC membership.
- Participate in at least five professional meetings or conferences with the DPAC display.
- Promote diabetes awareness month and World Diabetes Day to the general public.
- Develop a communications plan for dissemination of core facts and other emerging diabetes-related issues to the general public. Determine target audiences, preferred methods of communication (ex. fax blasts), and frequency of communication using these methods for campaign messages and materials in cooperation with other DPAC workgroups and key partners.
- Develop tools and templates for communication needs (ex. template for fax blasts).
- Review existing materials (NDEP, NIDDK, AADE, ADA, CDC) and select up to 10 core facts about diabetes aimed at the general public to disseminate through at least five communication channels.

Data, Research and Evaluation (DaRE)

- Prepare and analyze the annual DPAC member survey.
- Provided input for the Michigan Diabetes Fact Sheet.
- Support other DPAC workgroups with their data and survey needs.
- Develop and disseminate information on the cost and quality of diabetes prevention and care.
- Increase knowledge among health care providers on the latest diabetes and kidney disease research (including review of the Maternal Infant Health program's white paper on Diabetes and Pregnancy).
- Review and evaluate evidence-based continuing education programs that reach health providers and others serving people with diabetes.

Prevention

- Complete, implement and analyze pre-diabetes community survey (together with the DaRE workgroup).
- Review and revise resource lists for pre-diabetes education and support programs.
- Disseminate pre-diabetes and diabetes guidelines to medical societies.

Training and Education Programs

- Dissemination of information on oral health and diabetes.
- Support efforts in Maternal-Child Health to disseminate information to women of child-bearing age about healthy pre-conception, pregnancies and diabetes care.
- Continue to promote the Diabetes Community Health Worker presentation and efforts to expand programs.



Washington Square Building, 7th Floor
109 Michigan Ave.
Lansing, MI 48913
517.335.8378
www.michigan.gov/diabetes

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